

Open Enrollment Instructions

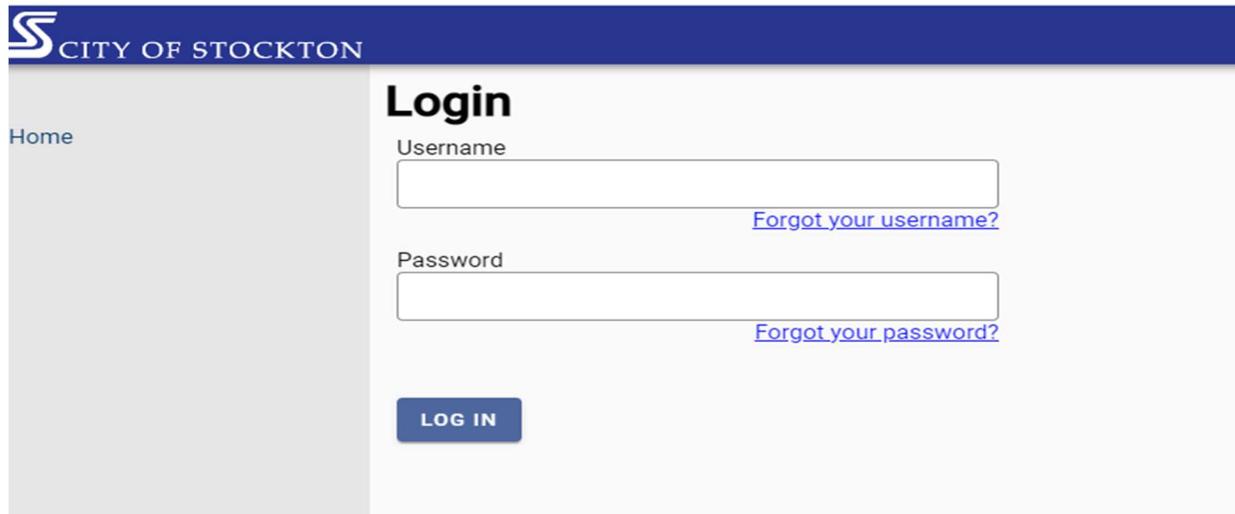
Process Overview:

1. Login to Tyler Munis ESS
2. View Existing Benefits
3. Make Elections
4. Review Enrollment
5. Confirm Choices

Step 1: Login to Tyler Munis ESS

<https://stocktoncaemployees.munisselfservice.com/default.aspx>

Please note that your ESS login username is your first initial, last name and employee number.



The screenshot shows the login interface for the City of Stockton ESS. At the top left, there is a blue header with the City of Stockton logo and the text "CITY OF STOCKTON". Below the header, on the left side, is a grey sidebar with a "Home" link. The main content area is white and features a "Login" heading. Underneath the heading, there are two input fields: "Username" and "Password". Each input field has a corresponding "Forgot your [username/password]?" link below it. At the bottom of the login form, there is a blue button labeled "LOG IN".

Step 2: View Existing Benefits

Step 3: Click on Open Enrollment to start making your elections

CITY OF STOCKTON

Open Enrollment – Make Elections

Employee Self Service

Benefits

Open Enrollment

Expense Reports

Pay/Tax Information

Personal Information

Time Off

WAIVE MEDICAL
Election not made DECLINE SELECT

HMO MEDICAL PLAN
Election not made
Existing benefit: KAISER HMO W/ PPO DENTAL AND VISION – \$98.17 DECLINE SELECT

POINT OF SERVICE MEDICAL PLAN
Election not made DECLINE SELECT

HDHP MEDICAL PLAN
Election not made DECLINE SELECT

DENTAL
Election not made Enrollment in this section requires enrollment in WAIVE MEDICAL

- If you select employee plus one or family plans, you must add dependents
- If you are electing NEW dependent, you MUST provide marriage/birth/adoption certificate
- All employees **must provide Social Security Number** for each enrollee.

Employers are required by law to collect the social security number (SSN) of each medical plan participant and provide that number on reports that will be provided to the IRS each year

CITY OF STOCKTON

Employee Self Service

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Benefits – HMO MEDICAL PLAN

EMPLOYEE ONLY

EMPLOYEE PLUS ONE

FAMILY PLANS

KAISER HMO W/ DHMO DENTAL AND VISION

Pay period employee cost \$170.43

Employee annual cost	\$0.00
Monthly cost	\$0.00

KAISER HMO W/ PPO DENTAL AND VISION

Pay period employee cost \$202.65

Employee annual cost	\$0.00
Monthly cost	\$0.00

Coverage must be added for at least 2 dependents

+ ADD NEW DEPENDENT

Add existing dependent ▼

SUTTER HMO W/ DHMO DENTAL AND VISION

Pay period employee cost \$195.42

Employee annual cost	\$0.00
Monthly cost	\$0.00

- Voluntary Life and Voluntary AD&D Insurance – please note that benefits amount for these MUST match. Beneficiaries must be indicated for employee.

CITY OF STOCKTON

Employee Self Service

Benefits

Open Enrollment

Life Events

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Time Off

Election not made

VOL LIFE INS EMPLOYEE
 Election not made
 Existing benefit: VOLUNTARY LIFE INSURANCE FOR EMPLOYEE – \$22.50
 DECLINE SELECT

VOL LIFE INS SPOUSE
 Election not made
 DECLINE SELECT

VOL LIFE INS CHILD(REN)
 Election not made
 Existing benefit: VOLUNTARY LIFE INSURANCE PLAN FOR CHILDREN – \$1.16
 DECLINE SELECT

VOL AD&D EMPLOYEE
 Election not made
 Existing benefit: VOLUNTARY AD&D FOR EMPLOYEE – \$4.20
 Enrollment in this section requires enrollment in VOL LIFE INS EMPLOYEE

VOL AD&D SPOUSE
 Election not made
 Existing benefit: VOLUNTARY AD&D FOR SPOUSE – \$0.32
 Enrollment in this section requires enrollment in VOL LIFE INS SPOUSE

VOL AD&D CHILD(REN)
 Election not made
 Existing benefit: VOLUNTARY AD&D CHILD(REN) – \$0.28
 Enrollment in this section requires enrollment in VOL LIFE INS CHILD(REN)

- Voluntary Life and Voluntary AD&D rates tables for your reference:

Voluntary Life Rates	
Employee Monthly Rates per \$1000 of Benefit	
Ages	Rate
0 - 29	\$ 0.0600
30 - 39	\$ 0.0900
40 - 49	\$ 0.1500
50 - 59	\$ 0.4300
60 - 69	\$ 1.2700
70 - 99	\$ 2.0600
Spouse Monthly Rates per \$1000 of Benefit	
Ages	Rate
0 - 29	\$ 0.0800
30 - 39	\$ 0.1200
40 - 49	\$ 0.2500
50 - 59	\$ 0.7400
60 - 69	\$ 2.3500
70 - 99	\$ 4.3500
Child Monthly Rates per \$1000 of Benefit	
	\$0.2320

Voluntary AD&D Rates	
Employee Monthly Rates per \$1000 of Benefit	
Ages	Rate
0-99	\$0.0280
Spouse Monthly Rates per \$1000 of Benefit	
Ages	Rate
0-99	\$0.0210
Child Monthly Rates per \$1000 of Benefit	
	\$0.0550

- Hospital Indemnity and Short-Term Disability rates tables for your reference:

Hospital Indemnity	
Tier	Monthly Rate
Employee	\$18.43
Employee + Spouse	\$52.07
Employee + Child(ren)	\$35.41
Employee + Family	\$66.66

Short Term Disability	
Age based monthly rates per \$10 of MONTHLY BENEFIT	
Ages	Rate
0 - 49	\$ 0.2750
50 - 59	\$ 0.4620
60 - 99	\$ 0.6210

- Medical/Dependent Care flexible account, Parking/Transit FSA, of HSA - please ensure that you are selecting per period amount and take note of annual limits.

 CITY OF STOCKTON

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Benefits – PARKING REIMBURSEMENT FSA

 The Parking Expense Reimbursement Plan enables you to avoid taxes on the money you use to pay for work-related parking expenses on your paychecks pre-tax. If you enroll in this plan you will receive a debit card that can be used to pay for your parking expenses automatically added to your current debit card. If the parking facility does not accept debit cards, you may submit an expense report for reimbursement.

PARKING REIMBURSEMENT FLEXIBLE SPENDING ACCT

Pay period employee cost	\$0.00
Pay period employer cost	\$0.00
Employee annual cost	\$0.00
Employer annual cost	\$0.00
Monthly cost	\$0.00

Amount

I Decline

- Select "Continue" after all elections are made.

CITY OF STOCKTON

Employee Self Service

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VOL LIFE INS CHILD(REN)
Declined
Existing benefit: VOLUNTARY LIFE INSURANCE PLAN FOR CHILDREN – \$1.16
EDIT

VOL AD&D EMPLOYEE
Declined
Existing benefit: VOLUNTARY AD&D FOR EMPLOYEE – \$4.20
Enrollment in this section requires enrollment in VOL LIFE INS EMPLOYEE

VOL AD&D SPOUSE
Declined
Existing benefit: VOLUNTARY AD&D FOR SPOUSE – \$0.32
Enrollment in this section requires enrollment in VOL LIFE INS SPOUSE

VOL AD&D CHILD(REN)
Declined
Existing benefit: VOLUNTARY AD&D CHILD(REN) – \$0.28
Enrollment in this section requires enrollment in VOL LIFE INS CHILD(REN)

VOL SHORT TERM DISABILITY INS
Declined
EDIT

Estimated total cost per pay period **\$202.65**

CONTINUE

Step 4: Review Enrollment and Submit

CITY OF STOCKTON
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Review your enrollment

<p>Employee Self Service</p> <p>Benefits</p> <p>Open Enrollment</p> <p>Life Events</p> <p>Expense Reports</p> <p>Pay/Tax Information</p> <p>Personal Information</p> <p>Time Off</p>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>WAIVE MEDICAL Declined Monthly Cost \$0.00</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>HMO MEDICAL PLAN KAISER HMO W/ PPO DENTAL AND VISION ISABELLA REFT MADELEINE REFT SHAUN REFT Pay period employee cost \$202.65 Annual employee cost \$4,863.60 Monthly Cost \$405.30</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>POINT OF SERVICE MEDICAL PLAN Declined Monthly Cost \$0.00</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>HDHP MEDICAL PLAN Declined Monthly Cost \$0.00</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>DENTAL Declined Monthly Cost \$0.00</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>VISION Declined Monthly Cost \$0.00</p> </div> <div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 10px;"> <p>Monthly Cost \$0.00</p> </div> <div style="border: 1px solid #ccc; padding: 5px;"> <p>ANNUAL AMOUNTS TOTAL EMPLOYEE COST \$4,863.60</p> <p>PERIOD AMOUNTS TOTAL EMPLOYEE COST \$202.65 TOTAL EMPLOYER COST \$0.00</p> </div>
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CANCEL MODIFY **SUBMIT**

Step 5: Confirm Choices

- Print Confirmation page for your records. Once your elections are approved you can no longer make changes.

Confirmation

✔ Your enrollment was submitted successfully. You can make changes until your choices have been approved. You may want to print this page for your records.

Please review your selections carefully and print this page for your records. These benefits will take effect on July 1, 2023, with payroll deductions beginning on July 21, 2023. No changes can be made after your selections are approved.

WAIVE MEDICAL Declined Monthly Cost	\$0.00
HMO MEDICAL PLAN KAISER HMO W/ PPO DENTAL AND VISION ISABELLA REFT MADELEINE REFT SHAUN REFT Pay period employee cost Annual employee cost Monthly Cost	\$202.65 \$4,863.60 \$405.30
POINT OF SERVICE MEDICAL PLAN Declined Monthly Cost	\$0.00
HDHP MEDICAL PLAN Declined Monthly Cost	\$0.00
DENTAL Declined Monthly Cost	\$0.00

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